

P.O. Box 2030, Truro, MA 02666
Tel: (508) 349-7004 Fax: (508) 349-5505

Applicant: _____ **Email:** _____

Mailing Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Type of Activity (Please be **specific** as to number of persons, equipment to be used (if any), whether food or beverages will be served, parking arrangements, etc.):

Town Property to be Used: _____

Date(s) and Hours of Use: _____ **Day:** _____

I, as applicant for the above, do hereby acknowledge that the town is exempt from any liability for this activity. I, as applicant for the above, additionally guarantee that the area to be used will be cleaned and left free of any debris at the completion of said activity. A fee of \$50.00 is to be submitted to the Town upon approval of the application by the Board of Selectmen.

Signature of Applicant

Date _____

Action by the Board of Selectmen:

Date: _____

_____ Approved as submitted

_____ Approved with the following condition(s): _____

_____ Disapproved with the following reason(s): _____

Signatures of the Board: _____

APPLICANT IS RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS & INSPECTIONS

Health/Conservation Agent Signature: _____ Comments/Conditions: Permits/Inspections needed:	Building Commissioner Signature: _____ Comments/Conditions: Permits/Inspections needed:
Police Department Signature: _____ Comments/Conditions:	Fire Department Signature: _____ Comments/Conditions:
DPW Signature: _____ Comments/Conditions:	Harbormaster Signature: _____ Comments/Conditions:
Recreation & Beach Director: _____ Comments/Conditions:	OTHER: _____ Comments/Conditions: